| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective December 29, 1999 |   |                  |                                  |                                  |       |  |                                   |     | Application or Docket Number : |      |                        |               |                     |                        |  |
|--|---|------------------|----------------------------------|----------------------------------|-------|--|-----------------------------------|-----|--------------------------------|------|------------------------|---------------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 2)                                      |   |                  |                                  |                                  |       |  |                                   |     | SMA                            |      | YIIIK                  | OR            |                     | R THAN<br>ENTITY       |  |
| FOR NUMBER FILED NUMBER EXTRA  |   |                  |                                  |                                  |       | EXTRA                                      |                                   | RAT | E                              | FEE  | 1                      | RATE          | FEE                 |                        |  |
| B.   | ASIC FEE  |                  |                                  |                                  |       |  |                                   |     | <b>C</b>                       |      | 345.00                 | OR            | 23.00               | 690.00                 |  |
| TO   | OTAL CLAIMS   |                  | 7 (_ minus 20:                   |                                  |       | . 60                                       |                                   |     | X\$ 9                          | -    | •                      | OR            | X\$18=              | 1008                   |  |
| DNI  | DEPENDENT C   | LAIMS            | / 2 minus 3 =                    |                                  |       | : 9  |                                   |     | X39                            |      |                        | OR            | X78=                | 702                    |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |                  |                                  |                                  |       |  |                                   | 1   | +130                           |      |                        | 1             | -                   | 70-                    |  |
| • #  | * If the difference in column 1 is less than zero, enter "0" in column 2  |                  |                                  |                                  |       |  |                                   |     |                                |      |                        | OR            | +260=               | 2// 2                  |  |
|  | / / CLAIMS AS AMENDED DARK!   |                  |                                  |                                  |       |  |                                   |     |                                | T [  | ·                      | OR            | TOTAL               | 2400                   |  |
|  | 10 1 04 (Column 1) (Column 2) (Column 3)  |                  |                                  |                                  |       |  |                                   | _   | SMAL                           | J E  | NTITY                  | OR            | OTHER<br>SMALL      |                        |  |
| AMENDMENT A  |   | REM              | ainis<br>Aining<br>Ter<br>Idment |                                  | PF    | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                  |     | RATE                           |      | ADDI-<br>TIONAL<br>FEÉ |               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Š.   | Total   | . 7              | 6                                | o Minus                          |       | 76   | - /                               | ŀ   | X\$ 9                          | •    |                        | OR            | X\$18=              |                        |  |
| AME  | Independent   | * /2             |                                  | Minus                            |       | - 12.                                      | <u> -/</u>                        |     | X39=                           |      |                        | OR            | X78=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |                  |                                  |                                  |       |  |                                   |     | +130-                          |      |                        | OR            | +260=               |                        |  |
| . // / / .   |   |                  |                                  |                                  |       |  |                                   |     | TOT.                           |      |                        | OR            | YOYAL<br>ADDIT, FEE |                        |  |
| ١  | (Column 1) (Column 2) (Column 3)  |                  |                                  |                                  |       |  |                                   |     |                                | ee F |                        | •             | ADDII. FEE          |                        |  |
| AMENDMENT B  |   |                  | ALMS<br>AINING                   |                                  |       | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                  |     | RATE                           |      | ADDI-                  | 1 1           |                     | ADDI-                  |  |
|  |   | AFTER<br>AMENDME |                                  |                                  |       |  |                                   |     |                                | 1    | TIONAL<br>FEE          |               | RATE                | TIONAL<br>FEE          |  |
|  | Total   | • 7              | 2                                | Minus                            | *     | 76   |                                   |     | X\$ 9-                         |      |                        | OR            | X\$18=              | •/                     |  |
|  | Independent<br>FIRST PRESE  | NTATIO           | N OF M                           | Minus<br>JUTIPLE DEF             | END   | ENT CLAIM                                  | -                                 |     | X39=                           |      |                        | OR            | X78=                |                        |  |
|  |   |                  |                                  |                                  |       |  |                                   |     | +130=                          |      |                        | OR            | +260=               |                        |  |
|  |   |                  |                                  |                                  |       |  |                                   |     |                                |      |                        | OR            | TOTAL<br>VOOIT, FEE |                        |  |
| •  |   | mn 1)            |                                  | į                                |       |  |                                   | •   |                                |      |                        |               |                     |                        |  |
| AMENDMENT C  |   | REMA             | UMS<br>VINING<br>TER<br>CIMENT   |                                  | PR    | IGHEST<br>IUMBER<br>EVIOUSLY<br>AID FOR.   | PRESENT<br>EXTRA                  | 1   | RATE                           |      | ADDI-<br>IONAL<br>FEE  |               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | •                |                                  | Minus                            | **    |  | 8                                 |     | X3 9=                          | 1    |                        | OR            | X\$18=              |                        |  |
|  | Independent   | • .              |                                  | Minus                            | ***   |  | 8                                 |     | X39=                           | +    |                        | .             | 2000                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                  |                                  |                                  |       |  |                                   |     |                                |      |                        | OR            | X78=                |                        |  |
|  | On auto-la auto-  | 4 to to          | A *                              |                                  |       |  |                                   |     | +130=                          |      |                        | OR            | +260=               |                        |  |
| •• [   | ' If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "flighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "flighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." |                  |                                  |                                  |       |  |                                   |     |                                |      |                        | OR ADDIT, FEE |                     |                        |  |
| i  | he Tighest Num  | ber Previ        | ously Peid                       | nu mor un TMR<br>I For (Total or | indep | ue is 1969 that<br>endent) is the          | n 3, enter "3."<br>Nighest number |     | NDDIT. FEI<br>and in the e     |      | priate box             |               | •                   |                        |  |

FORM PTO-675 (Res. 1289)